1 J. Jeffrey Coughlin (013801) J. JEFFREY COUGHLIN PLLC 2010 SEP 17 PM 4:39 2 114 S. Pleasant Street JEANIE HICKS, CLERK/ Prescott, Arizona 86303 3 Telephone: (928) 445-7137 Facsimile: (866) 890-8989 V. Adams BY:_ i.coughlin@azbar.org 4 Attorney for Plaintiffs 5 IN THE SUPERIOR COURT FOR THE STATE OF ARIZONA 6 IN AND FOR THE COUNTY OF YAVAPAI 7 JOHN B. CUNDIFF and BARBARA C. CUNDIFF, husband and wife; ELIZABETH 8 NASH, a married woman dealing with her separate property; KENNETH PAGE and 9 KATHRYN PAGE, as Trustee of the Kenneth Page and Catherine Page Trust, 10 CASE NO. P1300CV20030399 Plaintiffs, 11 AFFIDAVIT OF SERVICE vs. 12 13 DONALD COX and CATHERINE COX, husband and wife, 14 15 Defendants. 16 STATE OF ARIZONA SS. 17 County of Yavapai 18 J. JEFFREY COUGHLIN, being first duly sworn, upon oath, deposes and says: 19 The following parties being served are known to be located inside or outside of 1. 20 the state: 21 Date of Delivery Parcel No. **Party** 22 9/14/2010 Holly Lucero 40101029 23 9/14/2010 Jesus and Inez Valdez Trustees 40101005X 24 9/14/2010 Joshua and Anita D. Ollinger 10301114D 25 Ollinger Family Revocable Trust

1	High C's LLC	10301069G	9/14/2010
2	Linda J. Hahn Revocable Living Trust	40101012P	9/14/2010
3	Trust		
4	Deborah Ann Curtis	10301058A 10301058D	9/14/2010
5	Wells Family Trust	40101044E	9/14/2010
6 7	Charles and Billie Hutchison	40101012E	9/14/2010
8	Logan and Theresa Franks	10301060H	9/14/2010
9	William and Catherine Grace	10301002K	9/14/2010
10	Wm. Fred and Thresa Hyder	10301002F	9/14/2010
11	Darrell and Jennifer Fiedler	10301138J	9/14/2010
12	DiNaro Family Trust	40101014	9/14/2010
13	James D. Borel MD	40101005Q	9/14/2010
14	Jeff Unruh	10301150E	9/14/2010
15	Patrick and Vicki DiNieri	10301062F	9/17/2010
16	Robert and Heather Gardiner	40101015D	9/16/2010
17	Ottis R. and Delores F. Clark	10301075E	9/16/2010
18 19	1981 Bolen Trust	40101024B	9/16/2010
20	Ireneo and Marcietta Barcelona	10301059H	9/15/2010
21	Sergio Martinez and Susana Navarro	10301083F	9/16/2010
22	Kathy Ware and Patricia Pursell	10301150D	9/16/2010
23	Michael and Diane Glennon	10301056B	9/16/2010
24	HVS LLC	40101032	9/16/2010
25	Howard P. Roberts	10301138L	9/16/2010

	George and Romala Heady	40101042D	9/16/2010
	Ernest and Judy Rojas	10301115C	9/16/2010
	John P. and Karen Hough	10301138H	9/16/2010
	Klein Family Trust	10301068B	9/16/2010
	Kenneth and Elizabeth Yarbrough	10301080K	9/16/2010
	Kenneth and Elizabeth Yarbrough	10301060F	9/16/2010
	Leon H. and Noreen Vaughan	10301056F	9/16/2010
	Leo and Marilyn Murphy	40101020D	9/15/2010
,	Charles A. and Sherry S. Marx	10301113J	9/15/2010
	Grant and Pamela Griffith	10301067	9/15/2010
	Gary and Sabra Feddema	40101092	9/15/2010
	McCarty Living Trust	10301056G	9/15/2010
	Richard and Beverly Strissel	40101011N	9/15/2010
	Gary V. Wanzek Vincent and Dorothy Wanzek	40101038	9/15/2010
,	Cong Van Tong/Phi Thi Nguyen	10301074K	9/15/2010
	William R. and Judith Stegeman	40101012O	9/15/2010
	Deborah D. and James J. Jeager	40101035A	9/15/2010
	Wiechens Living Trust	40101012H	9/15/2010
	Henry and Iris Napier	10301081D	9/15/2010
:	Martha E. Bichon	10301138K	9/15/2010
	Guaranty Mortgage Trust LLC	10301080D	9/15/2010
	James and Lorraine Darrin	10301126E	9/15/2010
	Curtis D. Kincheloe	10301132	9/15/2010
1	1		

1	James and Doris Strom	40101031	9/15/2010
2	Living Faith In.	10301073F	915/2010
3	2. The summons	, a copy of this Court's Notic	ee and the First Amended Complaint
4	with attached Declaration of	Restrictions were mailed via	Certified Mail to the parties above.
5	3. The summons	, a copy of this Court's Notic	ee and the First Amended Complaint
6	with attached Declaration of	Restrictions were received by	y the above parties as evidenced by the
7 8	receipts, copies of which are	attached to this affidavit.	
9	4. The date of re	ceipt by each party is listed a	bove. The receipts were returned to me
10	on September 15, 2010.		
11			
12		Je C	· ·
13		J. JEFFREY COUG	HLIN
14	SUBSCRIBED AND	SWORN to before me this _	day of, 2010.
15 16		Notary Public	()em
17		110417 1 40110	
18	My commission expirescials ANNA NEI	EAL SON	
19	NOTARY PUZLIC - St. YAVAPAI CO	ate of Anzona	
20	Ny Committee Capture		
21	COPY of the foregoing		
22	mailed this 17 day of 2010 to:		
23	Loffroy D. Adoms		
24	Jeffrey R. Adams ADAMS & MULL, PLLC		
25	211 East Sheldon Street Prescott, AZ 86301 Attorneys for Defendants		

2428 West Coronado Ave.
Flagstaff, AZ 86001
Pro Per

Hans Clugston
HANS CLUGSTON, PLLC
1042 Willow Creek Road
Suite A101-PMB 502
Prescott, AZ 86301
Attorney for Margaret Kizlowski and Northern
Arizona Fiduciaries, Inc.

	3.4 36.2
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A Signature A Agent Addressee B Regulatory (Printed Name) C. Date of Delivery (14) 2010
Article Addressed to:	D. is dell very address different from item 1? Yes
Holly Lucero, aka Holly Denise Bowers 1426 S. Rita Lane Tempe, AZ 85281	
. VO. 6. 660	3. Ser Vice Type Certified Mail
2. Article Number	4. Res fricted Delivery? (Extra Fee)
	000 7008 5914
	102595-02-M-15
SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to:	A. Signature X
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space përmits. 	A. Signature X
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: Jesus and Inez Valdez Trustees 2410 E. Whitton Phoenix, AZ 85016 	A. Signature X
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Jesus and Inez Valdez Trustees 2410 E. Whitton 	A. Signature X
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: Jesus and Inez Valdez Trustees 2410 E. Whitton Phoenix, AZ 85016 	A. Signature X Addressee B. Received by Printed Name) C. Date of Delivery D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No 3. Service Type Certified Mail Registered Registered Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee)

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature X
1. Article Addressed to:	H. H. VES. enter delivery address below: No
loshua F. and Anita D. Ollinger/ Ollinger 14202 N. 68th Pl Scottsdale, AZ 85254	
	3. Service Type Certified Mail Registered Insured Mail C.O.D.
103011148	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7009 2820 (Transfer from service lab	0003 7607 8146
PS Form 3811, February 2004 Domestic	Return Receipt 102595-02-M-1540
SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you.	A. Signature X M Agent G-Addressee
Attach this card to the back of the mailpiece, or on the front if space permits.	B. Beceived by (Printed Name) C. Date of Delivery 9-14-10
Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below:
High C'S LLC 6750 N Viewpoint Drive Prescott Valley, AZ 86314	
	3. Service Type Cartified Mail Registered Insured Mail C.O.D.
10301069G	4. Restricted Delivery? (Extra Fee)
2. Article Number 7009 2820 (Transfer from service label)	0003 7607 8375
PS Form 3811, February 2004 Domestic Reti	urn Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece or on the front if space permits. 1. Article Addressed to: 	A. Signature, X. Delical Color of Agent Addresse B. Received by (Printed Name) C. Date of Deliver C. Date of Deliver C. Date of Deliver D. Is delivery address different from item 1? Yes
Linda J. Hahn Revocable Living Tro 10367 W. Mohawk Lane Peoria, AZ 85382	(f
40101010	3. Service Type Certified Mail Express Mail Registered Beturn Receipt for Merchandise C.O.D.
2. Article Number	4. Restricted Delivery? (Extra Fee)
(Transfer from service label)	2820 0003 7607 8054
PS Form 3811, February 2004 Domesi	tic Return Receipt 102595-02-M-1540
	*
	CONTRACTOR ON DELIVERY
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	A. Signature
Print your name and address on the reverse so that we can return the card to you.	X Early Vol Draddressee
Attach this card to the back of the mailpiece,	B. Received by (Printed Name) C. Date of Délivery
or on the front if space permits.	D. Is delivery address different from Item 1? Yes
. Article Addressed to:	If YES, enter delivery address below: No
*	
Deborah Ann Curtis 6070 Little Papoose Dr.	
Prescott Valley AZ 86314	3. Service Type Certified Mail Registered Insured Mail C.O.D.
103010584	4. Restricted Delivery? (Extra Fee)
Article Number 7009 2820	0003 7607 7385

CENDED	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature Agent Addressee B. Received by (Printed Name) C. Date of Delivery
1. Article Addressed to:	D. Is delivery address different from item 1?
Howard and Christine Wells Family 16225 N. 162nd L Surprise, AZ 853	evocable Living Trust
Ĭ lov on aller	3. Service Type Off Pertified Mail Registered Registered C.O.D.
401 01 044 E	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7009 2	820 0000 7008 5853
PS Form 3811, February 2004 Domest	ic Return Receipt 102595-02-M-1540
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature X Addr Je B. Received by (Printed Name) C. Date of Delivery Change The Third of the Service of Delivery D. is delivery address different from item 19
1. Article Addressed to: Charles and Billie Hutchison , 5737 N. 40th Lane	If YES, enter delivery address below:
Phoenix, AZ 85019	3. Service Type Certified Mail Registered Insured Mail C.O.D.
40101012E	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7009 2821 (Transfer from service label)	0 0003 7607 8108

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signerities Agent Addressee B. Received by (Printed Name) C. pate of Pelivery		
1. Article Addressed to:	D. Is delivery address different from item 1? If YES, enter refine address below: No		
Logan and Theresa Franks 4146 W. Banff Ln Phoenix, AZ 85053	S CEP 1 A 2010		
, , , , , , , , , , , , , , , , , , ,	3. Service Dair (4 Coress Mall Registered Return Receipt for Merchandise Insured Mail C.O.D.		
10301060H	4. Restricted Delivery? (Extra Fee) ☐ Yes		
Article Number 7009 2820 0003	7607 8405		
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.	COMPLETE THIS SECTION ON DELIVERY A. Signature Addressee R. Received by (Printed Name) C. Date of Jelivery D. is delivery address different from item 1?		
William and Catherine Grace P.O. Box 1549	If YES, enter delivery address below: ☐ No		
Cave Creek, AZ 85327	3. Service Type Certified Mail Registered Receipt for Merchandise Insured Mail C.O.D.		
10301002K	4. Restricted Delivery? (Extra Fee)		
2. Article Number 7009 2620 0003 7607 7361			

A. Signature
B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? If YES, enter delivery address below:
3. Service Type Certified Mail Registered Insured Mail C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes
003 7607 7354
eturn Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature X
1. Article Addressed to:	D. Is delivery address different from item 1? * ☐ Yes If YES, enter delivery address below: ☐ No
Darrell R. and Jennifer K. Fiedler 515 E. Carefree Hwy Phoenix, AZ 85085	
	3. Service Type Certified Mail Registered Insured Mail C.O.D.
<u> 103 01 138</u> J	4. Restricted Delivery? (Extra Fee)
2. Article Number 7009 285 (Transfer from service label)	20 0003 7607 7965
PS Form 3811, February 2004 Domestic Retu	urn Receipt 102595-02-M-1540

SENDER COL	
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece or on the front if space part of the space or on the front if space part of the space or on the front if space part of the space or on the front if space part of the space part	A. Signature X PSun 1; Magent Addressee
space permits.	b. racelyed by (Printer Name) C. Date of Delivery
Article Addressed to:	D. Is delivery address different from item 1? Yes
	If YES, enter delivery address below:
DiNaro Family T	
DiNaro Family Trust 111 S. Mount Vernon Ave.	
Prescott, AZ 86303	3. Service Type
	☐ Registered
40101014	4. Restricted Delivery (Fythe Fact)
2. Article Number (Transfer from service lab 7009 2821	—————————————————————————————————————
PS Form 3811, February 2004 Domestic] 0003 7607 7149
Domestic	C Return Receipt 102595-02-M-1540
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse	A. Signature X
 so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	B. Received by (Printed Name) C. Date of Delivery
1. Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
James D. Borel MD LTD Restated PRFT F P.O. Box 9870 Phoenix, AZ 85068	
/ to 1	3. Service Type Certified Mail
701010050	4. Restricted Delivery? (Extra Fee)
2. Article Number 7009 2820 01	003 7607 8122
(IIalisial IIOIII Service I	·

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature Agent Addressee B. Received by (Printed Name) C. Date of Delivery
Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
Jeff Unruh P.O. Box 27363 Prescott Valley, A.Z. con the	ESCOTT VALLE
Prescott Valley, AZ 86312	3. Service Type Control Mail Expression Registered Expression Registered C.O.D.
	Restricted Delivery? (Extra Fee)
2. Article Number 7009 2820 [1003 7167 8153
PS Form 3811, February 2004 Domestic Re	turn Receipt 102595-02-M-1540

COMPLETE THIC SECTION ON	DELIVERY
SENDER: COMPLETE THIS SECTION	☐ Agent
1 2 and 3 Also complete	☐ Addressee
item 4 if Restricted Delivery is desired.	C. pate of Delivery
Print your name and accord to you	
Attach this card to the base different fr	om item 1? Yes
or on the front it speed to	s below: LI No
1. Article Addressed to:	

Living Faith Inc.	
P.O. Box 12991 Prescott, AZ 86304 3. Service Type Certified Mail	press Mail
Registered Be	turn Receipt for Merchanding
Insured Mail LL C.	
4. Restricted Delivery? (Extra	(P60)
03010101	t and the same of
2. Article Nurriber 7009 2820 0003 7607 8535	102595-02-M-1540
(Transfer from service	سامير
PS Form 3811, February 2004 Domestic Return 1855	
	we year
SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION	ON DELIVERY
■ Complete items 1, 2, and 3. Also complete A. Signature	0
item 4 If Restricted Delivery is desired. Print your name and address on the reverse	Agent 🗆 Agent
' and that was non-network the should be seen at the same of the s	XX I/I /57\ JT Addresses
■ Attach this card to the back of the mailpiece,	Addressee C. Date of Delivery

4. Restricted Delivery? (Extra Fee) 7009 2820 0000 7008 5884 PS Form 3811, February 2004 Domestic Return Receipt

3. Service Type
Certified Mail
Registered

☐ Insured Mail

1. Article Addressed to:

2. Article Number

(Transfer from service label)

James and Doris Strom 5011 N. Cattlemen Drive Prescott Valley, AZ 86314 ☐ Express Mali

Return Receipt for Merchandise

☐ Yes

102595-02-M-1540

If YES, enter delivery address below:

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: 	A. Signature X Addressee B. Received by (Printed Name) C. Date of Delivery D. is delivery address different from item 1? If YES, enter delivery address below:
Curtis D. Kincheloe 8950 E. Mummy View Prescott Valley, AZ 86314	3. Service Type Certified Mail Registered Insured Mail C.O.D.
103 01 132	4. Restricted Delivery? (Extra Fee)
2. Article Number 7009 282	0 0003 7607 8078
ENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete	COMPLETE THIS SECTION ON DELIVERY A. Signature X. May B. Marriel C. Date of Delivery
item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to:	B. Received by (Printed Name) C. Date of Delivery of C. Date of De
James B. and Lorraine Darrin/Family Tru 13818 N. 30th St Phoenix, AZ 85032	3. Service Type Certified Mail Registered Return Receipt for Merchandise
	☐ Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes
103 01126	3
(Transfer from service k / UU 1 LU	0003 7607 7224 Return Receipt 102595-024M-1540
PS Form 3811, February 2004 Domestic	

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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse	A. Signature A. Signature Agent Address	
so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.	B. Received by (Printed Name) C. Date of Deliver	
1. Article Addressed to: Martha E. Bichon 7555 Santa Maria Vista Prescott, AZ 86305	D. Is delivery address different from item 1?	
	3. Sender Type Certified Mail DExpress Mail Registered Equity Receipt for Marshandi Insured Mail C.O.D.	se
103 01 138K	4. Restricted Delivery? (Extra Fee)	
2. Article Number 7009 282	0 0003 7607 7958	
	•	
SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature A. Signature A. Signature Addresse B. Received by Printed Name) C. Date of Deliver D. Is delivery address different from Item 1? Yes If YES, enter delivery address below:	-
Henry and Iris Napier 1135 Mohawk Trl Prescott, AZ 86303	3. Service Type . Certified Mail	=
103 OI O8 D	4. Restricted Delivery? (Extra Fee)	

7009 2820 0003 7607 8269

Domestic Return Receipt

2. Article Number (Transfer from service label)

PS Form 3811, February 2004

ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature X Physical Victoria Agent Addressee B. Received by (Printed Name) C. Date of Delivery Physical Physics G. Date of Delivery G. Date of Delivery
Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below:
Wiechens Living Trust 2501 S. Avenue 44E Roll, AZ 85347	
1.	3. Service Type Certified Mail Express Mail Registered Receipt for Merchandise Insured Mail C.O.D.
401 01 0124	4. Restricted Delivery? (Extra Fee)
Article Number (Transfer from service label)	0003 7607 8061
Form 3811, February 2004 Domestic Re	turn Receipt 102595-02-M-1540
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature X. Agent Addressee B. Received by (Printed Name) C. Date of Delivery 9.15-24:4 D. Is delivery address different from item 1? Yes
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece,	A. Signature A. Signature Agent Addressee B. Received by (Printed Name) C. Date of Delivery Q. 15-24:5
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: Guaranty Mortgage Trust LLC 120 White Cedar Dr	A. Signature X. Agent Addressee B. Received by (Printed Name) C. Date of Delivery Q. Y- 24; V D. Is delivery address different from item 1? Yes
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: Guaranty Mortgage Trust LLC 120 White Cedar Dr Sedona, AZ 86351	A. Signature X
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: Guaranty Mortgage Trust LLC 120 White Cedar Dr Sedona, AZ 86351	A. Signature X. Agent Addressee B. Received by (Printed Name) C. Date of Delivery A. Signature C. Date of Delivery Addressee B. Received by (Printed Name) C. Date of Delivery Addressee C. Date of Delivery Addressee If YES, enter delivery address below: No Service Type Certified Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	Signature X Agent Addressee B. Received by Plinted Name) Addressee
1. Article Addressed to:	D. Is delivery address different from item 1? If YES, enter delivery address below: No
Deborah Dawn and James John Jaege 9990 E. Turtle Roack Road	
Prescott Valley, AZ 86315	3. Service Type Certified Maii Registered Insured Maii C.O.D.
2. Article Number	4. Restricted Delivery? (Extra Fee)
	1003 7607 8863
PS Form 3811, February 2004 Domestic Re	eturn Receipt 102595-02-M-1540
ER: COMPLETE THIS SECTION COMPLE	ETE THIS SECTION ON DELIVERY
plete items 1, 2, and 3. Also complete	
4 if Restricted Delivery is desired. your name and address on the reverse at we can return the card to you. th this card to the back of the mailpiece, the front if space permits.	Agent Aldressee Addressee Addresse
a Addressed to	S, enter delivery address below: No

omj эm rint o th ittac r on urticle Villia 9200 W. Far Away Place Prescott Valley, AZ 86315 3. Service Type
Sertified Mail
Registered Express Mail

Deturn Receipt for Merchandise

C.O.D. ☐ Insured Mail 4. Restricted Delivery? (Extra Fee) ☐ Yes Article Number 7009 2820 0003 7607 8030 (Transfer from service label)

S Form 3811, February 2004

Domestic Return Receipt

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Cong Van Tong/Phi Thi Nguyen 8775 N. Coyote Springs Rd Prescott Valley AZ 86314 A. Signature X D. Is delivery addressed if YES, enter delivery address	
Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Cong Van Tong/Phi Thi Nguyen 8775 N. Coyote Springs Rd Prescott Valley AZ 86314 3. Service Type	Addressed C. Date of Delivery G. Date of Delivery G. Set different from term 1?
1. Article Addressed to: Cong Van Tong/Phi Thi Nguyen 8775 N. Coyote Springs Rd Prescott Valley AZ 86314 D. Is delivery addres If YES, enter deli	ss different from item 1? Yes
Prescott Valley AZ 86314 3. Service Type	
Certified Mall Registered Insured Mail	Express Mail Return Receipt for Merchandise C.O.D.
103 01 0742 4. Restricted Deliver	ry? (Extra Fee)
2. Article Number 7009 2820 0003 7607 73	123
NDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: COMPLETE THIS SECTION A. Signature A. Signature B. Received by (Printed Addressed by (Printed Addressed difference) D. Is delivery address difference if YES, enter delivery	Agent Addressee Name) C. Date of Delivery C. Date of Delivery C. Date of Delivery
ary V. Wanzek and Vincent and Dorothy Wanzek 9100 E. Lonesome Valley Road Prescott Valley, AZ 86314	
☐ Registered	Express Mail Return Receipt for Merchandise C.O.D.
Insured Mail	
4. Restricted Delivery?	(Extra Fee)
4. Restricted Delivery?	7491

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ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you.	A. Signature X. Kickurd Michael Addressee
Attach this card to the back of the mailpiece, or on the front if space permits.	Received by (Printed Name) C. Date of Delivery P.A. STRISSEL 9/15/10
Article Addressed to:	D. Is delivery address different from item 1?
Richard and Beverly Strissel 9350 E. Slash Arrow Dr. Prescott Valley, AZ 86314	
r rescott valley, AZ 00314	3. Service Type Certified Mail Registered Insured Mail Recipt for Merchandise C.O.D.
401 OL GILN	4. Restricted Delivery? (Extra Fee)
Article Number (Transfer from service 7009 2820 00	103 7607 7170
	A Marie a street of a state of the control of the c
S Form 3811, February 2004 Domestic Re	eturn Receipt 102595-02-M-1540
ENDER: COMPLETE THIS SECTION Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you.	COMPLETE THIS SECTION ON DELIVERY A. Signature B. Received by (Printed Name) C. Date of Delivery
ENDER: COMPLETE THIS SECTION Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you.	A. Signature A. Signature A. Signature A. Signature A. Signature C. Date of Delivery C. Date of Delivery
ENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece,	A. Signature B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from Item 17 Yes If YES, enter delivery address below:
ENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to:	A. Signature B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from Item 17 Yes If YES, enter delivery address below:
Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: McCarthy Living Trust, Lawrence & Heide 9085 N. Coyote Springs Rd.	A. Signature B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from Item 17 Yes If YES, enter delivery address below:
Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: Accarthy Living Trust, Lawrence & Heide 9085 N. Coyote Springs Rd.	A. Signature B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from Item 17 If Yes If YES, enter delivery address below: No McCarthy 3. Service Type Learnified Mail Registered Return Receipt for Merchandise
Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: Accarthy Living Trust, Lawrence & Heide 9085 N. Coyote Springs Rd.	A. Signature B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No McCarthy 3. Service Type Provided Mali Registered Insured Mali Restricted Delivery? (Extra Fee) Yes

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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: 	A. Signature Agent Agent
1. Audie Addressed to:	If YES, enter delivery address below: No
Gary and Sabra Feddema 9601 Far Away Place Prescott Valley, AZ 86315	
	3. Service Type Certified Mail Registered Insured Mail C.O.D.
401 01 09a	4. Restricted Delivery? (Extra Fee)
2. Article Number 7009 2820	0003 7607 7842
ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to:	A. Signature X
Grant and Pamela Griffiths 8815 E. Spurr Lane Prescott Valley, AZ 86315	3. Service Type
	☐ Certified Mail ☐ Express Mail ☐ Registered Æ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
103 01067F	4. Restricted Delivery? (Extra Fee) ☐ Yes
Article Number 7009 2820 0	003 7607 8566
Form 3811 February 2004 Domestic Petu	rn Pagaint 102505.02-M-1540

Form 3811, February 2004

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Domestic Return Receipt

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102595-02-M-15

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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature X Addressee B. Received by (Printed Name) Sherry Marx B. Pate of Delivery 9 /5 /10
Article Addressed to:	D. Is delivery address different from item 1?
Charles A. and Sherry S. Marx 7950 N. Coyote Springs Rd Prescott Valley, AZ 86315	
• –	3. Service Type Certified Mail Registered Insured Mail C.O.D.
103 01 1131	4. Restricted Delivery? (Extra Fee)
2. Article Number 7009 2820	0003 7607 8160
	•
NDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature Agent Addressee B. Received by (Printed Name) C. Date of Delivery
Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below:
Leo and Marilyn Murphy 9366 E. Turtlerock Road Prescott Valley, AZ 86315	
	3. Service Type Certified Mail
401010200	4. Restricted Delivery? (Extra Fee)

3 Form 3811, February 2004

Article Number (Transfer from service lab

Domestic Return Receipt

7009 2820 0003 7607 7996

ALEXED CONTOUR FOR THIS CECTION	TO THE PROPERTY OF COMMON ON DELIVERY
NDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the malipiece, or on the front if space permits.	A. Signature Agent Addressee
Article Addressed to:	If YES, enter delivery address below:
Leon H. and Noreen Vaughan 9235 N. Coyote Springs Rd. Prescoit Valley, AZ 86315	
, , , , , , , , , , , , , , , , , , ,	3. Service Type Certified Mall Registered Insured Mail C.O.D.
103010505	4. Restricted Delivery? (Extra Fee)
Article Number 7009 2820 C	1003 7607 7439
(Transfer from service lat	eturn Receipt 102595-02-M-1540
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature Agent Address B. Received by (Printed Name) C. Date of Delive KCWPTh 1 (a) (1004) Agent Address
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, 	A. Signature Agent Address B. Received by (Printed Name) C. Date of Delive
 ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Kenneth and Elizabeth Yarbrough 8560 E. Easy Street 	A. Signature Agent Address B. Received by (Printed Name) C. Date of Delive D. Is delivery address different from Item 1?
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: Kenneth and Elizabeth Yarbrough 	A. Signature A. Agent Address B. Received by <i>Printed Name</i>) C. Date of Delive C. Da
 ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Kenneth and Elizabeth Yarbrough 8560 E. Easy Street 	A. Signature A. Signature Address B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from Item 1? Yes If YES, enter delivery address below: 3. Service Type Certified Mail

(Transfer from service labor, PS Form 3811, February 2004

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also completed them 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailping or on the front if space permits. 	B. Received by (Printed Name) C. Date of Delivery
Article Addressed to:	D. is delivery address different from 1? Yes if YES, enter delivery address below:
Kenneth R. and Elizabeth A. Yark 8560 E. Easy St Prescott Valley, AZ 86315	prough
	3. Service Type Certified Mail
103 01 080K	4. Restricted Delivery? (Extra Fee)
2. Article Number 7009 28	320 0003 7607 8276
PS Form 3811, February 2004 Do	omestic Return Receipt 102595-02-M-154
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
■ Complete items 1, 2, and 3. Also complete	A. Signature
item 4 if Restricted Delivery is desired. Print your name and address on the reverse	X Don Olli Agent
so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.	B. Received by (Printed Name) C. Date of Delivery 9-16-10
Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: Yes
Klein Family Trust 8400 Easy Street Prescott Valley, AZ 86315	`
	3. Service Type Gertified Mail Express Mail Registered Insured Mail C.O.D.
103010683	4. Restricted Delivery? (Extra Fee)
2. Article Number 7009 2820 0003	3 7607 8399

PS Form 3811, February 2004

Domestic Return Receipt

ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpied or on the front if space permits.	Agent Agent Addressee B. Received by (Printed Name) C. Date of Delivery Printed Name D. Is delivery address different from Item 1? Yes
I. Article Addressed to:	If YES, enter delivery address below: 🔊 No
John P. and Karen R. Hough 8590 E. Windmill Acres Rd Prescott Valley, AZ 86315	3. Service Type 3. Service Type Express Mail Registered Return Receipt for Merchandise C.O.D.
103 N 138H	4. Restricted Delivery? (Extra Fee)
2. Article Number 7009 28	20 0003 7607 7989
INDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.	COMPLETE THIS SECTION ON DELIVERY A. Signature X. Agent Addressee B. Received by (Printed Name) C. Date of Delivery Truest Researce
Article Addressed to:	D. Is delivery address different from Item 1? Yes
rnest and Judy Rojas/Rojas Family Living 8310 N. Coyote Springs Rd Prescott Valley, Arizona 86314	Trust
102 -1 0	3. Service Type Gertified Mail Registered Insured Mail C.O.D.
103 OL 115C	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service laber 7009 2820	0003 7607 8139
PS Form 3811, February 2004 Domestic Re	turn Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature X Addressee B. Received by (Printed Name) C. Date of pelivery
Article Addressed to:	D. is delivery address different from item 1? * D res if YES, enter delivery address below:
George and Romala Heady 705 W. Happy Valley Road Phoenix, AZ 85027	(
/ /	3. Service Type Certified Mail Registered Insured Mail C.O.D.
401 01 04 2D	4. Restricted Delivery? (Extra Fee)
2. Article Number 7009 2820 (Transfer from service labe	0003 7607 7828
PS Form 3811, February 2004 Domestic Re	turn Receipt 102595-02-M-1540
SENDER: COMPLETE THIS SECTION	COMPLETE THIS STOTION ON A STOTION
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: 	A. Signature A. Addressee B. Received by (Printed Name) C. Date of Delivery A. C. Date of Delivery A. Signature A. Signatu
Howard P. Roberts 9936 Coyote Springs Rd Prescoot, AZ 86315	
103 11 1291	3. Service Type Contified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.
Article Number	4. Restricted Delivery? (Extra Fee)
(Transfer from service label) 7009 2820 C	1003 7607 7941

PS Form 3811, February 2004

Domestic Return Receipt

ber L I Oh, PET CO.	
ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to:	A. Signature X Hauflet Learn Addressee B. Received by (Printed Name)
HVS LLC 2564 S. Four Peaks Way Chandler, AZ 85286	
,	3. Service Type Certified Mail ☐ Registered ☐ Insured Mail ☐ C.O.D.
461 01 032	4. Restricted Delivery? (Extra Fee)
2. Article Number 7009 2820	0000 7008 5877
THE SECTION	COMPLETE THIS SECTION ON DELIVERY
NDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature X. Complete THIS SECTION ON DELIVERY A. Signature X. Complete THIS SECTION ON DELIVERY Addressee B. Received by (Printed Name) C. Date of Delivery C. Date of Delivery C. Date of Delivery C. Date of Delivery
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece,	A. Signature X. Company Maddressee B. Received by (Printed Name) C. Date of Delivery C. Date of Delivery
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature X. Como Sumon Agent Addressee B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from Item 1? Yes
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: Michael and Diane Glennon 9185 Coyote Springs Road	A. Signature X OLGMO SULLIMON Addressee B. Received by (Printed Name) C. Date of Delivery D. a ne Glennon D. is delivery address different from item 1? Yes
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: Michael and Diane Glennon 9185 Coyote Springs Road Prescott Valley, AZ 86314	A. Signature X. Composition of Agent Addressee B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? If YES, enter delivery address below: 3. Service Type Certified Mail Registered Receipt for Merchandise
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: Michael and Diane Glennon 9185 Coyote Springs Road Prescott Valley, AZ 86314	A. Signature X. Composition of Magnet Addressee B. Received by (Printed Name) D. Is delivery address different from item 1? Yes If YES, enter delivery address below: 3. Service Type Certified Mail Registered Insured Mail C. Date of Delivery Yes If Yes

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NDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete tem 4 if Restricted Delivery is desliged. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature Agent Addressee B. Received by (Printed Name) C. Date of Delivery ATH D. Is delivery address different from item 1? Pes No
Article Addressed to:	IF VEC and and aller address Delow.
Kathy A. Ware and Patricia Pursell/Ware 695 Eastwood Dr Prescott, AZ 86303	3. Service Type 3. Service Type 40 Certified Mail Registered Registered Receipt for Merchandise
	☐ Insured Mall ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes
103 01150D	
Article Number 7009 2820	
(Transfer from service labe,	Return Receipt 102595-02-M-1540
S Form 3811, February 2004 Domestic I	Tatal I i i i i i i i i i i i i i i i i i i
S Form 3811, February 2004 Domestic I	COMPLETE THIS SECTION ON DELIVERY
S Form 3011, February 2001	COMPLETE THIS SECTION ON DELIVERY A. Signature C. Agent Agent Agent Agent C. Date of Delivery
ENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to:	COMPLETE THIS SECTION ON DELIVERY A. Signature Agent Agent Agent Agent C. Date of Delivery
ENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.	COMPLETE THIS SECTION ON DELIVERY A. Signature OF GLOW Agent OF GLOW DENADORS See B. Received by (Printed Name) C. Date of Delivery OF GLOW AGENT TOOL OF THE SECTION ON DELIVERY OF GLOW DENADORS SEED TO THE SECTION ON DELIVERY OF GLOW DENADORS SECTION ON DELIVERY OF GLOW DELIVERY Agent OF GLOW DELIVERY Agent OF GLOW DELIVERY OF GLOW DELIV
ENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: Sergio Martinez and Susana Navarro	COMPLETE THIS SECTION ON DELIVERY A. Signature P. Received by (Printed Name) C. Date of Delivery Proproduction of Printer 1? D. Is delivery address different from item 1? Yes If YES, enter delivery address below:
ENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: Sergio Martinez and Susana Navarro 10150 N Lawrence Ln	COMPLETE THIS SECTION ON DELIVERY A. Signature A. Agent A. Agent A. Agent A. C. Date of Delivery A. D. La delivery address different from item 1? D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No 3. Service Type Certified Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.
ENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: Sergio Martinez and Susana Navarro 10150 N Lawrence Ln Prescott Valley, AZ 86315	COMPLETE THIS SECTION ON DELIVERY A. Signature P. Received by (Printed Name) C. Date of Delivery C. Date of De
ENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: Sergio Martinez and Susana Navarro 10150 N Lawrence Ln Prescott Valley, AZ 86315	COMPLETE THIS SECTION ON DELIVERY A. Signature A. Agent A. Agent A. Agent A. C. Date of Delivery A. D. La delivery address different from item 1? D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No 3. Service Type Certified Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.

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ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece or on the front if space permits.	B. Received by (Printed Name) C. Bete of Gilyo
. Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
Ireneo Jr. and Marietta Barcelona 1448 San Clemente Cir. Corona CA, 92882	
1	3. Service Type
10301059H	4. Restricted Delivery? (Extra Fee) Yes
Article Number (Transfer from service label, 7009 20	820 0003 7607 7422
	,
ER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
nplete items 1, 2, and 3. Also complete 4 if Restricted Delivery is desired. 5 your name and address on the reverse 1 at we can return the card to you. 1 this card to the back of the mailpiece, 1 the front if space permits.	A. Signature X My Bole Delivery B. Received by (Printed Name) PRULIBOIEN 9-16-10
Addressed to: 198 (Bolin) Trust 525 E. Mummy View Drive	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
Prescott Valley, AZ 86314	3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandise C.O.D.

Article Number
 (Transfer from service li

7009 2820 0003 7607 7927

4. Restricted Delivery? (Extra Fee)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

☐ Yes

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you.	A. Signature A. Signature A. Signature A. Signature Addressee B. Received by (Printed Name) C. Date of Delivery C. Date of Delivery C. Date of Delivery C. Date of Delivery
so that we can return the card to you. so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to:	D. Is delivery address different from item 1? D. Is delivery address below: If YES, enter delivery address below:
Ottis R. Dolores F. Clark 10150 Coyote Springs Rd Prescott Valley AZ 86315	3. Service Type Certified Mail Return Receipt for Merchandise
سيس ن بس	☐ Registered ☐ C.O.D. ☐ Insured Mall ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service lab) PS Form 3811, February 2004 Domes	72 72 72 72 72 72 72 72 72 72 72 72 72 7
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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Robert and Heather Gardiner 9690 Plum Creek Way	A signature Agent Addressee B. Received by (Printed Name) C. Date of Delivery Hearth of Gardiner 9-16-1 D. is delivery address different from item 17 Yes If YES, enter delivery address below:	
Prescott Valley, AZ 86315 L	3. Service Type Gertified Mail	
2. Article Number 7009 2820		
De Form 2011 February 2004 Demokia Date	Pageint CONTROL NO.	

PS Form 3811, February 2004

Domestic Return Receipt